

"From every point of view that occurs to me your movement is one that should have the support and sympathy especially of the members of the legal profession, of the members of the medical profession, and of all women who are interested in improving the opportunities for women of higher professional and practical work, for skilled nursing is a great field for women's activity. I wish you all success in your efforts, and shall be glad to be of any assistance to you in my power in securing the desired legislation."

[Each time that nurses have organized to secure State registration men and women of note have come forward to give their approval and support to the movement, and their names should live in the history of nursing progress.—Ed.]

The Spirit of Missions for February gives a very interesting account of the foot-binding custom among the Chinese. It seems that a girl with unbound feet has little chance of a husband. Public opinion will fully sustain a bridegroom in returning his bride to her mother if he discover after marriage that his wife has unbound or "large" feet. He is not likely to make this discovery before marriage, as young men and women, though they may be betrothed as children, are not allowed to see each other until the day of the wedding.

This custom of foot binding is so old that its origin is lost. There is no fixed age for beginning to bind the feet. Among the rich the binding is begun with girls of four or five; among the poorer people usually from seven to nine. In any case the process is intensely painful. "The four smaller toes are doubled under the foot, the big toe is laid on top, and the deformity is then tightly bandaged." The process is repeated every few days, the bandages being drawn more tightly each time. Three inches is considered a proper length for the deformed foot of a full-grown woman. . . .

Apparently nothing was ever done to abate the cruelties of foot-binding until the Christian missionaries began a campaign of education against it. They have been joined by other foreigners in the empire, and there is now a flourishing association known as the *Tien Tsu Hui*, or "Natural Feet Society." Some of the more progressive Chinese officials have coöperated with this society and have written protests against the foot-binding process. About two years ago the Empress Dowager issued an edict urging that it be given up. But in spite of both foreign and native opposition it will be many years before the practice disappears.

Recently the *Tien Tsu Hui* offered prizes for essays by Chinese on foot-binding. Over two hundred articles were received, most of them condemning the practice. Here, however, are two samples of the argument for the defence. Incidentally they show plainly the current Chinese opinion concerning women:

1. "Bound feet assist women to do their duty, which is to stay at home and not to gad about in their neighbors' houses.

2. "Those who complain of the pain involved in binding the feet forget that suffering is necessary for the proper development of woman's character. A woman who has not eaten this bitterness is likely to be opinionated and to want her own way. She will argue and quarrel with her husband, and the two will oppose each other like a pair of strong hands, each coming against the other, causing smacks and crashes. On the contrary, a bound-footed woman will receive correction and is submissive and obedient to her husband. Confucius says that women should be weak and men strong. This is the proper order."

As Christian teaching spreads foot-binding will naturally decrease. For

with Christian teaching will come a more just estimate of the place of women in Chinese life and unwillingness to inflict unnecessary pain upon the human body, and particularly upon the bodies of young girls. One rarely finds Christian fathers and mothers who bind the feet of their daughters. The whole missionary influence is against the practice. In many mission schools a practical kind of opposition to foot-binding, which appeals to many Chinese parents, is shown by charging school fees only for girls with bound feet. Those with unbound feet are received free.

THE PROFESSIONAL *vs.* THE TRAINED NURSE.—

To the *Editor of the Medical Record*.

SIR: Some time ago the subject of the education of nurses was considered in the *Medical Record* in the hopes of bringing some kind of response from members of the medical profession, and opening up the question in a radical and fundamental manner. But no response came, though the question has been touched upon in more recent issues of the *Medical Record*. However, good material for opening up the subject may be found in an article in the *Medical Record* of September 26, which probably represents the conservative and general opinion of the medical profession. In this contribution it is said that, "thanks to the great advance made in nursing in our day, we physicians can usually have our directions and treatment of patients intelligently and faithfully carried out if we constantly have the courage to insist upon what is best for the well-being of our patients and our moral self-respect. I am not quite sure that the nurse's realization of the doctrine of self-sacrifice and devotion has continuously improved. I am also convinced that more than one subject nurses are taught at some length in the schools had better be let alone. This acquired smattering of anatomy, physiology, and therapeutics is often of practical detriment in the role of the nurse. They are tempted, with imperfect knowledge, to give counsel or direct at times when they should seek only to comfort and serve."

The name of the author of the above is purposely omitted in order to avoid every appearance of personal polemic in the advocacy of opposing opinions. For the same and other reasons the writer assumes a nom-de-plume. Ideas are only of value as they prove true. The author is simply a vehicle, as his pen is, and amounts to nothing. The days of ambition for honors or notoriety have passed. The primary and fundamental question is the amount and character of the instruction given to nurses or asked for by them, and may well be introduced by requoting the following: "That more than one subject nurses are taught at some length in the schools had better be let alone. This acquired smattering of anatomy, physiology, and therapeutics is often of practical detriment to the nurse. They are often tempted, with imperfect knowledge, to give counsel or direct at times when they should seek only to comfort and serve."

Admitting that the accusation is true in many cases, is it not equally true that the real trouble lies in the very "smattering of imperfect knowledge" on the part of the culprit? Is it not this "smattering" which constitutes the dangerous thing, or "little knowledge," complained of in the well-known and oft-quoted saying. Would not a more fundamental, and at the same time broader, education in scientific fundamentals remove or nullify the very danger mentioned? Would not more knowledge with specific education in its professional application enable the intelligent nurse to better understand her place and keep her professional position, both in regard to the attending physician and patient? The trouble seems to be just where it has been placed, but with quite the contrary meaning—that is, in the "smattering of imperfect knowledge" now wofully